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THE DECLINE OF MATERNITY; ITS CAUSES AND ITS REMEDY.

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It is said to be the ambition of every French woman to become the mother of but one child. A glance at the vital statistics of recent United States Census Reports would seem to justify the inference that the women of our own country, unlike their sisters of the French Republic, would willingly forego the responsibilities, pain, and perils of motherhood altogether, and be content to live without offspring. The decrease of the rate of increase of population began many years ago, both in Europe and America. Dr. Horatio Storer, of Boston,¹ some time ago, stated that the increase in Sweden had lessened by one-ninth in 61 years; in Prussia by one-third in 132 years; in Denmark by one-fourth in 82 years; in England by two-sevenths in a century; in Russia by one-eighth in 28 years; in Spain by one-sixth in 30 years; in Germany by one-thirteenth in 17 years; and in France by one-third in 71 years. In the United States the decrease has been still more marked, the natural increase of population having decreased from 28.2 per cent. from 1831 to 1840, to 22.78 per cent. from 1871 to 1880; while during the ten years from 1860 to 1870 the natural increase was only a little over 15 per cent., showing a falling off of nearly 13 per cent. in 30 years.

The total increase of population in the United States since 1830 has averaged about 32 per cent. every ten years; but the increment has been largely due to immigration, and it is a note-worthy fact that in many localities the natural increase has occurred to a very large extent among the foreign element. The average size of families in this country, as well as in Europe, has for many years grown smaller and smaller. In England the average number of children to each marriage, in 1885, was 5.2; in Austria 4; while in the United States, in 1880, the average number of children to each family, including all under 21 years of age, was only 2.51. Since the above dates the birth-rate in most countries has steadily declined,

¹ American Journal of Science and Arts.

the number of bacilli remains unchanged. Salol appears to lessen disintegration of tuberculous material, but has not any anti-tubercular action.—*British Medical Journal*.

Intravenous Injections of Sublimate Solution.—G. BACCELLI, after making numerous experiments on animals, has established the method of intravenous sublimate injections in treating obstinate, malignant malaria, cerebral syphilis and hydatids of the liver. The solution used is—

R. Hydrarg. Perchlor.	gm. i.
Nat. Chlorat.	gm. iii.
Aqu. Distil.	gm. 1000 M.

By pressure, the veins at the elbow are made to stand out, and a syringe (1 c.cm.) of the fluid is injected, which is followed by some salivation in about five or six minutes. This amount is injected daily, and soon it is gradually increased up to 8 c.cm. The advantages of the method are: (1) The small quantity of the drug used. (2) The possibility of combating rapidly the severe symptoms due to syphilitic blood poisoning. (3) The prompt action on the vessel wall, the favorite seat of syphilis. The author speaks highly of the treatment of hydatid of the liver by injecting 20 grammes of a 1:1000 sublimate solution after about 30 c.cm. hydatid fluid has been drawn off. After five days the patient may be looked upon as cured, since the parasite is dead, and the symptoms rapidly recede.—*British Medical Journal*, April 7, 1894.

MEDICINE AND PATHOLOGY.

By ALBERT ABRAMS, M.D., Professor of Pathology, Cooper Medical College, San Francisco.

The Organic Juices.—WILLIAM C. KRAUSS specifies the epoch in which we live as the sky-rocket period of the 19th century. Men, like methods, approach their zenith with an increasing roar and sparkling brilliancy, and as suddenly fade, to fall with a dull and heavy thud. The first reports of the method of Brown-Sequard read like a fairy tale, and the "Elixir of Life," so-called, seemed to be the magic fluid that philosophers had vainly sought for centuries. Brown-Sequard resuscitated a method of treatment dormant for more than 300 years in the alcoves of the National Library of Paris, and established by one Dr. Mizauld, a physician who lived in Paris in the 16th century. The writer makes the following quotation from the work of Dr. Mizauld: "If the genital organs of a red bull be bruised in a mortar and taken by a woman in some wine or soup, it will give her a disgust for love, while, to the contrary, the same beverage taken by a debilitated man will reawaken his amorous desires." The famous communication of Brown-Sequard to the Société de Biologie of Paris, on June 1, 1889, certainly contained nothing more explicit. Many enthusiastic reports were presented in 1889 and 1890, confirming Brown-Sequard's observations after injections of testicular juice. Gradually the reports became less numerous and less encouraging, save those which came from the master himself and some of his former pupils. Perhaps the greatest check to this movement was the fact that Charcot and his pupils refrained from using these injections, or, at least, never gave it their sanction. Pulawski made a series of experiments with 12 cases, and came to the following conclusions: "Local pain and abscess formation; fever with chills; no specific action; subjective and positive amelioration were dependent upon suggestion." Ovarian juice has given, according to Brown-Sequard, similar results, though less marked than those of testicular fluid. Spermin is a derivative of Brown-Sequard's testicular juice, and its action seems to be similar. Brown-Sequard's method is discon-

tinued at the present time by neurologists, both in America and in Europe, but the master and his pupils still employ it with good results in a certain class of nervous diseases. Following this method of treatment, Gley injected the juice of thyroid glands in dogs deprived of these organs, and found, instead of dying, they recovered without serious difficulties. In the human family, it has been found, after removal of the thyroid gland through disease, that a certain train of symptoms will develop, which have received the name of myxedema, an affection manifested by swelling of the face, body and extremities, loss of hair, subnormal temperature, etc. Horsley attempted to transplant the thyroid gland of animals to these patients, and met with particular success. Murray, of Newcastle, then injected hypodermically a glycerine extract, with good results. The injections were followed, in many cases, by pain, inflammation and abscess formation. To overcome these hindrances, Fox and Mackenzie advised treatment of myxedema by feeding with sheep's thyroid, and the results seem to be every way satisfactory. Dieulafoy has injected extracts of the cortical portion of the kidney into patients suffering with Bright's disease. He proposed the name *nephrine* for this particular fluid. Comby and Dieulafoy have also injected an extract of pancreas in cases of diabetes, with temporary good results. The author's conclusions in regard to the animal extracts are: "That since recent experimenters fail to corroborate the results obtained immediately after the introduction of Brown-Sequard's method, the whole matter must be left open for further investigation. That many of the results obtained were due to suggestion and auto-suggestion, and that no specific action has been discovered." In a recent work by Chéron, of Paris, the following occurs: "All liquids when introduced under the skin produce identical effects, provided they are not toxic and have no specific toxic action. They increase arterial tension, and, in the diseases in which these fluids have been used, a degree of hypertension has existed, which being relieved by injections, temporary results have followed."—*The Medical Age*.

Embolism of the Brain.—SAVELIEW has studied all the cases of this affection—102 in number—which have occurred during the 37 years (1856 to 1893) of Virchow's *regime* in Berlin. The majority of patients are afflicted with some heart lesion in more than 89 per cent. of the cases. The main source of cerebral emboli is from precipitates from the blood on the endocardium, and next in order of frequency ulceration processes in the endocardium itself. The distribution of 144 clinical cases of cerebral embolism according to age was as follows: (1) 1 to 10 years, 4; (2) 11 to 20, 17; (3) 21 to 30, 33; (4) 31 to 40, 23; (5) 41 to 50, 35; (6) 51 to 60, 26; (7) over 60 years of age, 6 cases. According to the foregoing, the largest number of cases of cerebral embolism occurred during the fifth decennium. The writer found cerebral embolism of more frequent occurrence in women than in men. The clinical course of the affection is briefly as follows: The individual is usually attacked suddenly without warning. There may be fever, chills, delirium, vertigo, headache, vomiting, palpitation of the heart, dyspnea, together with motor sensory disturbances. After an attack the patient may improve greatly; consciousness is restored, paralyses and other manifestations may disappear. Improvement is of course dependent on the reestablishment of the circulation of the blood by the collateral vessels. It is also dependent on the fact that certain parts of the healthy brain can do vicarious duty for the affected parts. Sooner or later a second attack occurs, and the source of the emboli cannot be eliminated. The following are cited as characteristic symptoms of embolism: Loss of consciousness, demonstration of